

**Application Data Sheet****Application Information**

Application number::  
Filing Date::  
Application Type:: Regular  
Subject Matter:: Utility  
Title:: Spectrophotometer  
Attorney Docket Number:: 080670-000000US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Total Drawing Sheets:: 12  
Small Entity?:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: New Zealand  
Status:: Full Capacity  
Given Name:: Cornelis  
Middle Name:: Kees  
Family Name:: KLEIN  
City of Residence:: Hamilton  
Country of Residence:: New Zealand  
Street of Mailing Address:: 14 Pheasant Close, RD9, Rotokauri  
City of Mailing Address:: Hamilton  
Country of mailing address:: New Zealand  
Postal or Zip Code of mailing address:: 2021

**Correspondence Information**

Correspondence Customer Number:: 20350

**Representative Information**

Representative Customer Number:: 20350

**Domestic Priority Information**

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

**Foreign Priority Information**

Country::	Application number::	Filing Date::
New Zealand	521406	09/13/02
New Zealand	521407	09/13/02
PCT	PCT/NZ2003/000207	09/15/03

**Assignee Information**

Assignee Name:: Klein Medical Limited  
Street of mailing address:: 1/26 Victoria Road, Devonport  
City of mailing address:: Auckland  
State or Province of mailing address::  
Country of mailing address:: New Zealand  
Postal or Zip Code of mailing address:: 1309